Bruce O. Boxberger, City Attorney

APPROVED AS TO FORM

AND LEGALITY

RESOLUTION NO. R-25-85

A RESOLUTION authorizing certain officials of the City of Fort Wayne to sign verification of service credit forms for the Indiana State Public Employees Retirement Fund in behalf of City employees wishing to retire.

WHEREAS, the State of Indiana requires that a verification of service credit form be transmitted to the Indiana State Public Employees Retirement Fund to verify the amount of service time that an employee wishing to retire has completed; and

WHEREAS, the City of Fort Wayne finds it necessary at this time to name specific individuals to sign such verification of service credit forms.

NOW, THEREFORE, BE IT RESOLVED BY THE COMMON COUNCIL OF THE CITY OF FORT WAYNE, INDIANA:

SECTION 1. That the Controller of the City of Fort Wayne, Cosette R. Simon; or the Deputy Controller, James Haley; or the Supervisor of Payroll Services, Dean Chandler are hereby authorized to complete and sign the necessary verification of service credit forms as required by the State of Indiana Public Employees Retirement Fund in behalf of City employees intending to retire.

SECTION 2. That this Resolution shall be effective upon passage and any and all necessary approval by the Mayor.

Councilmember

| seconded by Saby title and refe | erred to the | e Committee | Public Hearing | g to be he | and the City |
|--------------------------------------|--|--------------|---|------------------------|----------------------|
| due legal notice | , at the Co | uncil Chambe | ers, City-Count | Building | , Fort Wayne, day of |
| Indiana, on | | , the, 19 | , at / | | kM.,E.S. |
| DATE: | 2-26-8 | | SANDRA E. KE | NNEDY, CIT | , , |
| Read the seconded by passage. PASSED | (2roa | aure | nd on motion by, and duly ad lowing vote: | opted, pla | ced on its |
| | AYES | NAYS | ABSTAINED | ABSENT) | TO-WIT: |
| TOTAL VOTES | 7 | | | 2 | |
| BRADBURY | - | | | | |
| BURNS | _ | | | | |
| EISBART | 0 | | | | |
| GiaQUINTA | · · · | | | | |
| HENRY | - | | | | |
| REDD | | | | | |
| SCHMIDT | | | | | |
| STIER | Married Control of the Control of th | | | | |
| TALARICO | - | | | | |
| DATE: | 3-12-1 | 85 | Sandra E. KE | f. Lenne NNEDY, CIT | |
| Passed | and adopted | by the Com | mon Council of | the City o | f Fort |
| Wayne, Indiana, | as (A NNEXA T | ION) (APP | ROPRIATION) (| GENERAL) | |
| (SPECIAL) (ZON | ING MAP) C | RDINANCE | (RESOLUTION) N | | |
| on the /o | 2 th | day of | Mond | | 1985, |
| Sandra | | 1 | (SEAL) Mark (Seal) PRESIDING OF | Ja Suis | nla |
| SANDRA E. KENNED | | | . / / | A THE SAME OF | 7-2/ |
| on the | ed by me to | the Mayor | of the City of | | 1985, |
| | | | . 1// | | , 1923 |
| at the hour of _ | 11.0 | 0'0 | | M.,E.S.T. | , |
| | | | SANDRA E. KE | ENNEDY, CIT | TY CLERK |
| Approve | d and signe | ed by me thi | s 14th day of | merce | <u> </u> |
| 19_85, at th | | | | A | |
| | | | WIN MOSES | IR MAYOR | |

| REPORT OF T | HE COMMITTEE ON | FINANCE | |
|--|---------------------|---------------|--------------|
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| WE, YOUR COMMITTEE ON | FINANCE | | TO WHOM WAS |
| REFERRED AN (OKOYYNAWCE) | (RESOLUTION) auth | orizing certa | in officials |
| of the City of Fort Wa | yne to sign verific | ation of serv | ice credit |
| forms for the Indiana | State Public Employ | ees Retiremen | t Fund in |
| behalf of City employe | es wishing to retir | e | |
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| HAVE HAD SAID (ORDINANCE) LEAVE TO REPORT BACK TO TO (RESOLUTION) YES Anet & Brashury | | | |
| Samuel Salario | SAMUEL J. TALARICO | | |
| Spinn C. Henry | THOMAS C. HENRY | | |
| | JAMES S. STIER | | |
| CONCURRED IN 3-12-85 | | SANDRA E. KEI | NNEDY |

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| Admn. | Appr. | Age of the second secon |
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DIGEST SHEET

| DIGEST SHEET |
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| TITLE OF ORDINANCE Resolution Resolution |
| DEPARTMENT REQUESTING ORDINANCE Controller |
| SYNOPSIS OF ORDINANCE A Resolution authorizing certain officials of the City of |
| Fort Wayne to sign verification of service credit forms forwarded to the Indiana |
| State Public Employees Retirement Fund in behalf of the City employees wishing |
| to retire. |
| These verification of service credit forms are required for an employee's retirement. |
| The State of Indiana will no longer accept these verification forms unless they are sign |
| by a person who has been given specific authorization to sign by the Common Council. |
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| EFFECT OF PASSAGE Provides the necessary documentation required by the State |
| of Indiana in order for an employee to retire. |
| |
| EFFECT OF NON-PASSAGE The documentation sent to the retirement fund to enable |
| an employee to retire would not be acceptable to the State of Indiana |
| |
| MONEY INVOLVED (Direct Costs, Expenditures, Savings) none |
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| ASSIGNED TO COMMITTEE (J.N.) |
| DAME CUDATOMED. |
| DATE SUBMITTED: |